### COMMAND INSPECTION PROGRAM INSPECTION CHECKLIST

Chapter 6 Command Grant Management

| Command:                                 | Division:       | Number:             |
|--|-----------------|---------------------|
| Victorville                              | Inland Division | 850                 |
| Evaluated by:                            |                 | Date:               |
| Joette Wilson, AGPA/Sergeant Eric Robles |                 | 11/23/2009          |
| Assisted by:<br>Mark Sunseri, Sergeant   |                 | Date:<br>11/23/2009 |

| INSTRUCTIONS: Answer individual items with "Yes" or "No" answers applicable legal statues, or deficiencies noted in the inspections shall discrepancies and/or deficiencies shall be documented on an Excepti Furthermore, the Exceptions Document shall include any follow-up an Inspection, the "Follow-up Inspection" box shall be marked and only deficiency. | be comment<br>ons Docume<br>id/or correcti | ed on via the<br>nt and addre<br>ve action(s) | e "Remarks<br>essed to the<br>taken. If th | s" section. A<br>e next level o<br>is form is us | of command.            |
|---|--|---|--|--|------------------------|
|   | fit a discoss                              | Anda Cianatus                                 |  |  |                        |
| TYPE OF INSPECTION  |  | tor's Signatur                                |  |  |                        |
| ☐ Division Level☐ Command Level☐  |  | tew   | 2130                                       | 7(   |                        |
| Division Level  | 1 ou                                       |   |  |  |                        |
| ☐ Executive Office Level ☐ Voluntary Self-Inspection  | )  |   | $\sim$                                     |  | Date:                  |
| Follow-up Required:   | Commande                                   | r's Signature:                                | ( )  |  | Date.                  |
| ☐ Follow-up Inspection  | 178  | TUNG 85.                                      | ( ) -                                      |  | 1/15/2010              |
| ☐ Yes ☐ No  | 111.0                                      | 1111/002                                      | . Hot.                                     |  | 1115 1000              |
|   |  |   |  |  | l l                    |
| For applicable policy, refer to: GO 40.6  |  |   |  |  |                        |
|   | الجادا                                     | lined for ov                                  | planation                                  |  |                        |
| Note: If a "No" or "N/A" box is checked, the "Remarks" section  | snall be uti                               | lized for ex                                  | piariation                                 | 12 115 115                                       | NAME OF TAXABLE PARTY. |
| If the commander became aware that another agency or organization is proposing or has submitted   | ⊠ Yes                                      | □ No  | □ N/A                                      | Remarks:   |                        |
| a grant application to a funding agency other than the  | 2 .00                                      | 1 <del>1 - 1</del> 1.593                      |  |  |                        |
| Office of Traffic Safety (OTS) that appears to focus  |  |   |  |  |                        |
| on traffic safety goals clearly within the jurisdiction of  |  |   |  |  |                        |
| the Department, did the commander notify the  |  |   |  |  |                        |
| appropriate assistant commissioner?   |  |   |  |  |                        |
| 2. Has OTS grant funding, through the Highway Safety  | ☐Yes                                       | ⊠ No  | □ N/A                                      | Remarks:   |                        |
| Plan, been sought for traffic safety-related activities for the purpose of conducting inventories, need and   | □ 169                                      | △ 140   |  |  |                        |
| engineering studies, system development or program  |  |   |  |  |                        |
| implementations?  |  |   |  |  |                        |
| 3. Has the command sought grant funding to assist with  |  | n response                                    |  | Remarks:   |                        |
| the expenses associated with the priority programs  |  | ☐ No  | □ N/A                                      | Tronnante.                                       |                        |
| identified by the National Highway Traffic Safety   |  |   |  |  |                        |
| Administration?  4. Has the commander ensured grant funds are not   |  |   |  |  |                        |
| 4. Has the commander ensured grant funds are not being reallocated to fund other programs or used for   | ⊠ Yes                                      | □No   | □ N/A                                      | Remarks  |                        |
| non-reimbursable overtime expenditures?   |  | A Inchies                                     |  |  |                        |
| <ol><li>Are concept papers regarding grant funding</li></ol>  | 200  |   |  | Remarks:   |                        |
| submitted through channels to Grants Management   |  | ☐ No  | □ N/A                                      | T.C.HEUNO.                                       |                        |
| Unit (GMU)?   |  |   |  |  |                        |
| 6. Was GMU contacted to determine the current   | ⊠ Yes                                      | □No   | □ N/A                                      | Remarks:   |                        |
| personnel billing rates used for grant projects when preparing concept paper budgets?   | <u>⊠</u> 163                               |   |  |  |                        |
| preparing concept paper budgets:  |  | <del></del>                                   |  |  |                        |

#### COMMAND INSPECTION PROGRAM INSPECTION CHECKLIST

Chapter 6

Command Grant Management

| 7. Is supporting documentation of consent and acceptance (of the work, goods, or services provided by the state on behalf of a local government agency as required by 23 Code of Federal Regulations Part 1250) being submitted to OTS for all grant projects coded as "for local benefit"?                                       | ☐ Yes | □ No | ⊠ N/A | Remarks: No occurrences at Command Level. |
|---|-------|------|-------|---|
| Were all copies of the grant project agreements, revisions, and claim invoices signed by the Project Director, or designated alternate?   | ⊠ Yes | □No  | □ N/A | Remarks:                                  |
| 9. Were all inquiries or correspondence concerning the availability of grant funds or other contacts with grant funding agencies coordinated/processed through GMU?   | ⊠ Yes | □No  | □ N/A | Remarks:                                  |
| 10. Are all expenditures of grant funds approved by GMU prior to entering into any obligations, with the exception of personnel costs?  | ⊠ Yes | □No  | □ N/A | Remarks:                                  |
| 11. Are quarterly progress reports forwarded though channels to GMU in accordance with the instructions contained in the associated project MOU?  | ⊠ Yes | □No  | □ N/A | Remarks:                                  |
| 12. Are all requirements of the grant agreement and MOU being met?  | ⊠ Yes | ☐ No | □ N/A | Remarks:                                  |
| 13. Is a final project report being prepared in accordance with the funding agency and departmental requirements upon the termination of the grant project?   | ⊠ Yes | □ No | □ N/A | Remarks:                                  |
| 14. Does every invoice associated with a grant funded project contain the project number and name?  | ⊠ Yes | ☐ No | □ N/A | Remarks                                   |
| 15. Are all purchases of grant-funded equipment acquired under an OTS grant exceeding a unit cost of \$5,000 being documented on an Equipment Report, Form OTS-25?  | ☐ Yes | □ No | ⊠ N/A | Remarks: No occurrences at Command Level. |
| Has grant funded equipment been inspected to ensure it is being utilized in accordance with the respective grant agreement?   | ☐ Yes | ☐ No | ⊠ N/A | Remarks: No occurrences at Command Level. |
| <ul> <li>17. Are applications for federal funds in accordance with Government Code Section 13326 including obtaining approval from the Department of Finance and/or the Governor's office prior to submission to the appropriate federal authority?         <ul> <li>This would include any of the following:</li></ul></li></ul> | ☐ Yes | □No  | ⊠ N/A | Remarks: No occurrences at Command Level. |

#### **COMMAND INSPECTION PROGRAM INSPECTION CHECKLIST**

Chapter 6 Command Grant Management

| 18          | Is a federal Standard Form 424, Application for Federal Assistance, filed with the State Clearinghouse for all approved unbudgeted grant requests received by the Department of Finance?   | ☐ Yes           | □No  | ⊠ N/A  | Remarks: No occurrences at Command Level.  |
|-------------|--|-----------------|------|--|--|
|             | Has any request for unanticipated federal funds met the criteria for legislative notification set forth in Control Section 28.00 of the annual Budget Act?   | ☐ Yes           | □No  | ⊠ N/A  | Remarks: No occurrences at Command Level.  |
|             | Are grant funds being used for their intended purpose?   | ⊠ Yes           | ☐ No | □ N/A  | Remarks:   |
|             | Are grant applications related to the Motor Carrier Safety Assistance Program (MCSAP) being routed through the Commercial Vehicle Section before they are submitted to the funding agency?   | ☐ Yes           | □No  | ⊠ N/A  | Remarks: No occurrences at Command Level.  |
| 22          | Are grant applications related to the Homeland Security Grant Program being routed through the Emergency Operations Section before they are submitted to the funding agency?   | ☐ Yes           | □No  | ⊠ N/A  | Remarks: No occurrences at Command Level.  |
| ľ           | Capillition to the lattering agains,   |                 |      | the same of the sa | AND THE RESIDENCE OF THE PROPERTY OF THE PROPE |
| Quest       | ions 23 through 26 pertain to the Grants Managemen   | t Unit          |      | O W AST  |  |
| Quest<br>23 | ions 23 through 26 pertain to the Grants Managemen . Has GMU prepared an annual Management Memorandum to be disseminated to all commanders soliciting participation in the Department's Highway  | t Unit<br>☐ Yes | □ No | ⊠ N/A  | Remarks:   |
| 23          | ions 23 through 26 pertain to the Grants Management. Has GMU prepared an annual Management Memorandum to be disseminated to all commanders soliciting participation in the Department's Highway Safety Program?  Did GMU send the concept paper as an attachment to a memorandum through the Planning and Analysis Division to Assistant Commissioner, Field, and Assistant Commissioner, Staff, and their Executive |                 | □ No |  | Remarks:   |
| 24          | ions 23 through 26 pertain to the Grants Management. Has GMU prepared an annual Management Memorandum to be disseminated to all commanders soliciting participation in the Department's Highway Safety Program?  Did GMU send the concept paper as an attachment to a memorandum through the Planning and Analysis Division to Assistant Commissioner, Field, and  | ☐ Yes           |      | ⊠ N/A  |  |

#### COMMAND INSPECTION PROGRAM INSPECTION CHECKLIST

Chapter 6 Command Overtime

| Command:                                  | Division:       | Number:             |
|---|-----------------|---------------------|
| Victorville Area                          | Inland Division | 850                 |
| Evaluated by:                             |                 | Date:               |
| Eric Robles, Sergeant/Joette Wilson, AGPA |                 | 11/23/2009          |
| Assisted by: Mark Sunseri, Sergeant       |                 | Date:<br>11/23/2009 |

| INSTRUCTIONS: Answer individual items with "Yes" or "No" answers applicable legal statues, or deficiencies noted in the inspections shall discrepancies and/or deficiencies shall be documented on an Exception Furthermore, the Exceptions Document shall include any follow-up an Inspection, the "Follow-up Inspection" box shall be marked and only definition. | be comment<br>ons Docume<br>id/or correcti | ted on via th<br>int and addr<br>ve action(s) | e Remarks<br>essed to the<br>taken. If th | e next level of command. is form is used as a Follow-up |
|---|--|---|---|---|
| THE OF MODERATION   | Lead Inspec                                | ctor's Signatu                                | re:                                       |   |
| TYPE OF INSPECTION  ☑ Division Level ☐ Command Level  | A  | $)))_{\star}$                                 | al  |   |
| Executive Office Level  Voluntary Self-Inspection   | 7 4  |   |   |   |
| Follow-up Required:   | Commande                                   | r's Signature:                                | `   | Date:   |
| ☐ Follow-up Inspection  | TR   | unus (  | )   | 1/15/2010   |
| Yes No  | 11,01                                      | unce),  | -841.                                     | 1 (1) 10010   |
| For applicable policies, refer to HPM 11.1, Chapter 6, HPM 40.71, Chapters 2, 8, and 10, HPM 10.5,  |  |   |   | ~ I   |
| Chapter 2, and HPM 10.3, Chapters 24 and 28.  |  |   |   |   |
|   | I N. L. Berta                              | ne al facili                                  | lanation                                  | an agrava sudi velekasi Majar V                         |
| Note: If a "No" or "N/A" box is checked, the "Remarks" section  | snall be ut                                | llized for ex                                 | kpianauori.                               |   |
| Is the hiring company/agency for reimbursable overtime being held responsible for paying a  | ⊠ Yes                                      | ☐ No  | □ N/A                                     | Remarks:  |
| minimum of four hours of overtime per CHP   |  |   |   |   |
| uniformed employee, regardless of length of service/detail?   |  |   |   |   |
| Is a minimum of four hours overtime being allocated   |  | 4004/676/                                     |   | Remarks:  |
| to each CHP uniformed employee(s) if cancellation   |  | ☐ No  | □ N/A                                     | Remarks.  |
| notification is made 24 hours or less prior to the scheduled detail and the assigned CHP uniformed  |  |   |   |   |
| employee(s) cannot be notified of such cancellation?  |  |   |   |   |
| 3. Are reimbursable special project codes being used  | ⊠ Yes                                      | □No   | □ N/A                                     | Remarks:  |
| for all overtime associated with reimbursable special projects?   | ⊠ 1es                                      |   |   |   |
| 4. Is the commander ensuring nonuniformed personnel   | 5-1  | - ·   |   | Remarks:  |
| overtime hours are not reflected on the Report of   |  | ☐ No  | □ N/A                                     |   |
| Overtime Hours for Reimbursable Special Projects?  5. Is the commander ensuring non-reimbursable  |  |   |   |   |
| overtime is not being claimed for an employee, other  |  | ☐ No  | □ N/A                                     | Remarks:  |
| than Bargaining Unit 7, while on vacation or  |  |   |   |   |
| compensated time off for hours worked during their regular work shift time?   |  |   |   |   |
| 6. Is "RDO" being written in the "Notes" section of the   | 57.  |   | □ NI/A                                    | Remarks:  |
| CHP 415, Daly Field Record, for overtime worked on  | ☐ Yes                                      | ☐ No  | □ N/A                                     |   |

### COMMAND INSPECTION PROGRAM INSPECTION CHECKLIST

Chapter 6 Command Overtime

|    | a regular day off?  |       |      |       |  |
|----|---|-------|------|-------|--|
| 7. | Is there a CHP 90, Report of Court Appearance -<br>Civil Action, completed for each officer or sergeant<br>when overtime is associated for civil court?                 | ⊠ Yes | □No  | □ N/A | Remarks: Of the CHP 90s and corresponding CHP 415s audited, six of the CHP 415s had the wrong overtime duty code, one CHP 415 had no overtime indicated even though the CHP 90 showed overtime, and two CHP 415s did not indicate civil court in the note section. |
| 8. | Do the CHP 415s with overtime indicate the employee's lunch period or indicate "None" if the employee worked through their lunch break?                                 | ⊠ Yes | □No  | □ N/A | Remarks:   |
| 9. | Did the supervisor sign the CHP 415s approving the overtime?  | ⊠ Yes | □No  | □ N/A | Remarks:   |
| 10 | Are claimed overtime meals related to overtime worked within 50 miles of the employee's headquarters?   | ☐ Yes | □No  | ⊠ N/A | Remarks: No occurrences for audited period.  |
| 11 | If overtime is incurred by a peer support counselor, is the name of the employee to whom support was provided excluded from the CHP 415 of the counselor?               | ☐ Yes | □ No | ⊠ N/A | Remarks: No occurrences for audited period.  |
| 12 | . Is the "Notes" section on side two of the CHP 415 used to explain any overtime listed on side one of the CHP 415?   | ⊠ Yes | □No  | □ N/A | Remarks: With the exception of two CHP 415s, in which no court time was indicated, all other CHP 415s were in compliance.  |
| 13 | . Are employee's Compensated Time Off hours maintained within reasonable balances?  | ⊠ Yes | □No  | □ N/A | Remarks: Eight out of 40 uniformed employees CTO balances were at the maximum allowed or within the mid 400s. Manager and supervisors review CTO balances each month and ensure that employees who are at max or close to do not earn CTO.                         |
| 14 | . Is the commander ensuring employees are not incurring overtime due to working over the allotted number of hours for any given Fair Labor Standards Act (FLSA) period? | ⊠ Yes | □No  | □ N/A | Remarks:   |
| 15 | Is the commander ensuring uniformed employees are not working voluntary overtime which results in them working more than 16.5 hours in a 24 hour period?                | ⊠ Yes | □No  | □ N/A | Remarks:   |
| 16 | Do the CHP 415 total overtime hours agree with the Monthly Attendance Report (MAR)?   | ⊠ Yes | □No  | □ N/A | Remarks:   |
| 17 | Are the MARs retained for at least three years and<br>contain the commander's signature?  | ⊠ Yes | □No  | □ N/A | Remarks: The MARs are being retained for three years but several have not been signed by the Area Commander.   |

#### COMMAND INSPECTION PROGRAM EXCEPTIONS DOCUMENT

| Command:         | Division:            | Chapter:            |
|------------------|----------------------|---------------------|
| Victorville Area | Inland Division      | 6                   |
| Inspected by:    | /Joette Wilson, AGPA | Date:<br>11/23/2009 |

Page 1 of 3

| INSTRUCTIONS: This document shall be number of the inspection in the Chapter I shall be routed to and its due date. This improvement, identified deficiencies, corr | nspection<br>docume | on number.  Under "Forw<br>ont shall be utilized to doc | ard to:" enter the nex<br>cument innovative pr | actices, suggestions for statewide                      |
|---|---------------------|---|--|---|
| TYPE OF INSPECTION    Division Level  |                     | Total hours expended on the inspection: 2 hours         |  | ☐ Corrective Action Plan Included☐ Attachments Included |
| Follow-up Required:   | Comm                | rd to: Assistant<br>iissioner, Field<br>ate: 1/8/2010   |  |   |
| Chapter Inspection: Inspector's Comments Regard   |                     |   | S:   |   |
| Command Suggestions for St  | atewio              | de Improvement:   | =  |   |
|   |                     | ** *** *******************************                  |  |   |

Inspector's Findings:

A random sampling of the Area's CHP 90, Report of Court Appearances revealed 13 contained errors. Six CHP 415s were improperly coded, one CHP 415 did not contain any overtime though it was claimed on the CHP 90, and two CHP 415s did not indicate any court appearance. After discussing the review procedures with the Area supervisors it was noted most of the time the CHP 90 and CHP 415 were reviewed separately. Consequently, there is no means to ensure the overtime claimed on the CHP 90 and the CHP 415 are the same.

An audit of the uniformed and nonuniformed employees CTO balances revealed that eight out of forty uniformed employees are close to the maximum or at the maximum allowed balances. Area supervisors and manager discuss employee CTO balances with employees on a continuous basis and reminds them that they may not exceed established CTO balances and are encouraged to use CTO when requesting time off.

The Monthly Attendance Reports (MARs) are retained in the Area for three years. Of the thirteen MARs audited only one was signed by the Area Commander. When brought to the Area's Administrative Sergeant's attention he ensured the Area would review all MARs and that the Commander's signature is obtained. In the future, the Area office manager will ensure that all MARs are signed by the Area Commander or his/her designee prior to being filed.

## COMMAND INSPECTION PROGRAM EXCEPTIONS DOCUMENT

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| Command:         | Division:              | Chapter:            |  |
|------------------|------------------------|---------------------|--|
| Victorville Area | Inland Division        | 6                   |  |
| Inspected by:    | nt/Joette Wilson, AGPA | Date:<br>11/23/2009 |  |

| Commander's Respons   | e: 🗹 Concur or 🗌 Do Not Concur (Do Not Concur shall document basis for response)        |
|-----------------------|---|
| Inspector's Comments: | Shall address non concurrence by commander (e.g., findings revised, findings unchanged, |
| etc.)                 | the discussion between the CHR 90's and the correlating                                 |
|                       | the discussion between the CHU Unic and the Correlation                                 |

The Area Commander was made aware of the discrepancies between the CHP 90's and the correlating CHP 415's. It was recommended the Area establish procedures for the submission of the CHP 90 and CHP 415 to supervisors for review.

# **COMMAND INSPECTION PROGRAM**EXCEPTIONS DOCUMENT

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CHP 680A (Rev. 02-09) OPI 010

| Command:         | Division:              | Chapter:            |
|------------------|------------------------|---------------------|
| Victorville Area | Inland Division        | 6                   |
| Inspected by:    | nt/Joette Wilson, AGPA | Date:<br>11/23/2009 |

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|---|--|
| Required Action   |  |
|   |  |
| Corrective Action Plan/Timeline                                   |  |
| CONTOCATO ACCIONA NATIONALE                                       |  |

| Employee would like to discuss this report with                  | COMMANDER'S SIGNATURE  | DATE         |
|--|--|--------------|
| the reviewer.<br>(See HPM 9.1, Chapter 8 for appeal procedures.) | 1:1.3  | 115 2010     |
|  | INSPECTOR'S SIGNATURE  | DATE 12/8/09 |
|  | REVIEWER'S SIGNATURE   | DATE         |
| Reviewer discussed this report with<br>/employee                 | A TOTAL OF THE PARTY OF THE PAR | 2/8/10       |
| ☐ Concur ☐ Do not concur   | JX/1940  | 12/0/10      |
| •  | - 9  | / /          |